EXHIBIT 14

| | | | HIS FORM T ERS OBTAIN | O REPOI | RT: CRIMI | E CLASSII | FICATI | 644-HB O, TES, CA REJ0, CRIM | SE CLEA | RANCES ENT DAT | A. USE COMP | LAINT FOLLO | COMPLA W-UP (P | 0 31. | 2008 ERED PROPERT TO REPORT TH | E PRECED | MAL STO | | 1 |
|--------------|---------|-----------------------------|--------------------------|------------------|------------------|-----------------------|-----------|---------------------------------------|---------|-------------------|----------------|------------------|-------------------|----------------|--------------------------------------|---------------|------------|------------|---------------|
| Í | H | in ∦ | OMPLAINT FORMATIO | NAL | | Crin | ne | | | | | Pct. | OCCB I | | Complaint No | OF . | | his Report | 14 |
| _ | 4 | ₽D | 313-081A | (Rev. 4- | | | 0: | | OMIC: | | | 43 | | | 2412 | | O2 | -16-01 | PERP |
| Da | sie i | of Orig. R 02-1 | eport L2 - 01 | Date A | ssigned 2-12- | 01 | Case 6 | 24 | Unit R | eporting BRON | X HOMI | CIDE TA | SK I | FORCE | | | onow-ob | | PERP |
| Co | mp | PSN | Name · Las FOR | i, First. ALF | M I. BERT | ACOS' | TA | | | | Victim's N | ame - If Differ | ent | | | | | | 15 |
| _ | | | me, First. | | | | | | | | Addre | ess, Include | City, S | tate, Zip | | | | Apt. | |
| Witness | - 02 | Home 1 | elephone | | | Bu | siness | Telephone | | P | Position / Rel | ationship | | Sex | Race | Date | of Birth | Age | PER |
| _ | ᆚ | Total N | No of | Wante | d Ari | rested | l We | apon | | Des | cribe Weapon | (if firearm, g | ive color | , make, ca | libre, type, mod | ei, etc.) | | | + |
| | _ | Perpetrators Used Possessed | | | | | | | | | | | | | Apt. N | o Res. F | | | |
| | | Wante | d Arre | | ast Name, | FIRSE, M. | 1. | | | | | | | Address. | include City, Sta | ate, 21p | Αμί. 1 | Nes. 1 | 16 |
| | N 5 | | Race | Date o | of Birth | A | ge | Height | - 1 | /eight | Eye Color | Hair Color | Hair | Length | Facial Hair | | NYSID | No. | CHO 1 |
| ş | E G | | Eyeglasses | | <u> </u> | Clothing | Descr | ription, | In | | | | | | | | | | CHO 2 |
| Perpetrators | | Nic | kname, Firs | t Name, | , Alias | | | M.O., Etc 'Details''): | | | | | | | | | | | _ |
| Per | 1 | Wante | d Arre | | ast Name, | | | , , , , , , , , , , , , , , , , , , , | | | | | | Address | , Include City, St. | ate, Zip | Apt. | No Res. I | Pct. 1 CHO |
| | 5 | Sex | Race | | of Birth | A | \ge | Height | W | Veight | Eye Color | Hair Color | Hair | Length | Facial Hair | | NYSID | No. | |
| | Oern Mo | ليطف | Eyeglasses | Sur | nglasses | Clothing | n Deer | FI | !n | | | | | | <u> </u> | | | | CHO |
| | | | kname, Firs | | | Scars, | Marks | , M.O., Etc. | | | | | | | | | | | |
| 1 | ARE | EA WITH | IN BOX FO | R DET | ECTIVE | | | <i>'Details''):</i> GERPRINT OFFI | CER ON | LY. TH | IS BOX WIL | L BE UTILIZ | ED BY | INVESTIG | ATOR WHENE | VER POS | SIBLE A | ND MUST | BE CHO |
| _ | | LLY CON | | In Pe | | By Pho | | Date CLOSE A CASI | . "NO I | Time | S.'' | Results: S | ame as (| Comp. Repo | ort - Different (E | xplain in D | etails) | | СН |
| | | Yes | □ No | |] | | | | | Ţ: | | | | <u> </u> | | | | | _ |
| | | ress Inter Yes | viewed □ No | in Pe | _ | By Pho | one | Date | | Time | | Hesults: S | ame as (| | ort - Different (E | xpiain in D | etalis) | | |
| C | | vass Cond | ducted No | If Ye | | Entry in s, Addres | | Re: Time, Date, Results | | | Crime Scer | ne Visited | If Y | | Entry in Details ce Obtained | Re: Time, | Date, | | СН |
| C | | | Viewed Pho | | | Resi | ults: | | | | <u> </u> | | | | | | | | |
| ٧ | Vitn | ness View | red Photos | | | Res | ults: | | | | | | | | | | | | CH |
| | _ | Yes me Scene | ☐ Refuse | ed C | By (En | ter Resul | ts in D | elails) | | | Crime | Scene Photo | , 1 | By (Ente | er Results in Det | ails) | | | PE |
| _ | [| □ Yes | □ No | No. B | | | | · | C1 | | | Yes | | | | | | | |
| | | | mproper R | | | -2 inacc | | Facts C- | | | e / Can't ID | C-4 U | псооре | rative Con | nplainant | □C-5 ·· | Leads'' | Exhausted | PE |
| | DE | TAILS: | | | | | т | NVESTIGA | ттом | | UOMT | CIDE | | | | | | | PEI |
| | | | | | | | 1 | SUBJE | | • | INTE | CIDE RVIEW | | | | | | | |
| ı | | 1. | ca-c | 2/1 | 6/01. | the | un | dersigne | d wa | s or | | | | | Y OFFICE ter Secu | | Offi | ce | PE |
| | | | TOC | ate | d at | loc | ate | d 62 Met | ropo | lita | an Oval | , RO11 | Call | Offi | ce and o | | | | |
| | | | | | | | | ates the | | | J | | | | | | | | |
| | | 2. | He for | res: Pa | ides rkche | at 1 | .536 | Lewland a Secur | Ave | nue, Guar | telep | hone 7 e 1991 | 18 - 9 | 31 - 93 | 89. He | has i | worke | ed nas | PE |
| | | | wor | ked | all | tour | s. | but has | wor | ked | days f | or the | las | t 3 t | o 4 year | cs. | He di | ld | PE |
| | | | ori | .gin | ally | sche | dul | oruary 12 .ed to on | Mon | day. | This | was c | hang | ed be | cause Ma | angan | iello | had | - |
| | | | a | ver | bal c | dispu | ıte | with a t | enea | int a | and his | post | had | to be | change | d no | one t | alked | PE |
| | | | 815/ | m. | They | / bro | ough | , about i it breakf | ast | and | went t | o the | roof | of 1 | 522 Unio | onpor | t Roa | ad to | - [|
| | | | eat | sai | d bre | eakfa | st. | Then a | ijob | can | ne over | for a | dis | pute | at 1700 | Metr | opol: | itan. | .11 d |
| | | | but h | ne h | ad to | hav | re t | oack-up t | o re | spor | nd so i | t was | assi | gned | to Acos | ta to | bacl | k him | |
| | | | I al | Lso | tried | l to | res | ent to wa | the | loca | ation v | rith A | cost | a and | was to | ld no | t to | respo | ond |
| | | | Not s | ure | if : | it wa | as c | lispatch job. Nex | or t | he s | sergear | nt. I | don' | t rec | all hear | ring | any | - | PI |
| | | | I re | spo | nd to | o 170 | 1 OC | Metropoli | .tan | and | I find | lit∤Al | bert | . Th | ev Albe | rt an | d Ant | thony | |
| | | | ususa | ally | don | 't wo | rk | together gument b | :. F | le al | lso sta | ites' th | at h | ie hea | rd that | a te | nant | in | PE |
| | | | shoo | otin | g. I | He wa | as t | cold this | thr | u ar | nother | party. | CITE | . Hall | way pr | 101 L | U LII | . | - |
| - | | 3. | The | e un | ders | igned | l di | id attemp | ot to | res | spond 1 | o Ant. | #7R. | bac | laparmt | net n | nmpe. | r. | |
| ١, | CAS | 4. | Case | e St | atus | Act | ive | ATE REVIEWED / | | | | | | | OF NEXT REVIE | | | | |
| L | | ACTIVE | □clo | | | | | 2 | LUSEU | | | | L | IVE, DATE | OF NEAL MEVIE | | | | |
| | | ORTING | | RAN | k DE | r | S | IGNATURE V | 7 | \leq | | NAME PRIN | TED ALAC | fires. | | TAX REG. 8757 | | COMMA | ND |
| - | _ | | CLOSING | | CA | | EN | TER DESIGNATIO | N | | Te | GNATURE | ar A(| yrus - | 1 | | . O 's INI | BXHTF | |